

The Alliance

A WESTPAC Medical Alliance Publication



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Message from the WPMA Commanding Officers



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It is our pleasure to present to you the newest issue of "The Alliance," a publication of the WESTPAC Medical Alliance (WPMA).

The WPMA, through U.S. Naval Hospital (USNH) Guam, USNH Okinawa and USNH Yokosuka, provides the finest, cost-effective health services in the world to America's heroes — those who currently serve, those who have served and the family members who support them.

To inform base communities, afloat forces, operational commands and all military treatment facility staff about the WESTPAC's services and activities, the commanding officers of all three hospitals present "The Alliance" as a forum to provide information on WPMA activities and functions, benchmark and share ideas, educate and promote services and programs,

promote new initiatives and communicate guidelines.

In this issue you will find information on Navy Medicine's role in responding to the new H1N1 flu strain, learn about neonatal intensive care unit (NICU) training and services taking place across the region to provide enhanced care to mothers and babies and see what customer service efforts we are implementing to improve our interaction with you, our beneficiaries. We've also included a year in review to highlight the services the WPMA facilities provided in 2009 and to give you a glimpse of what we will be focusing on in 2010 to provide you the best care possible.

Thank you for your interest in the WESTPAC Medical Alliance. We hope that you find this newsletter useful and informative.



USNH Guam



USNH Okinawa



USNH Yokosuka

Overview of the WESTPAC Medical Alliance

In support of the forward deployed forces in the Western Pacific, U.S. Naval Hospital (USNH) Guam, USNH Okinawa and USNH Yokosuka formed the WESTPAC Medical Alliance (WPMA), a partnership to identify efficient, patient-centered solutions for health care support. This is done by incorporating all three hospitals' assets across the Pacific to develop enhanced services.

The outcome of the Alliance is patient and family-centered care programs that improve the military community. Some of the WPMA initiatives are sharing personnel with unique specialties that may not be available at one of the other military treatment facilities (MTFs), sharing resources to manage short-term staffing shortages at a facility, consolidating staff education and training and enhancing regional disaster preparedness and responses.

These cooperative efforts mean better health care for all beneficiaries and commands. The WPMA offers several potential advantages. It allows consultants to be shared among the three WESTPAC facilities and it reduces the need to move patients, allowing them to remain closer to home and social support networks. The partnership also yields higher satisfaction for patients, families and commands by decreasing travel and per diem costs.

Finally, the WPMA allows active duty patients a quicker return to duty, provides more training opportunities for specialists assigned to WESTPAC MTFs and improves hospital staff satisfaction.



H1N1 Highlights Role of Public Health Emergency Officers

By Jennifer Savage, U.S. Naval Hospital Yokosuka

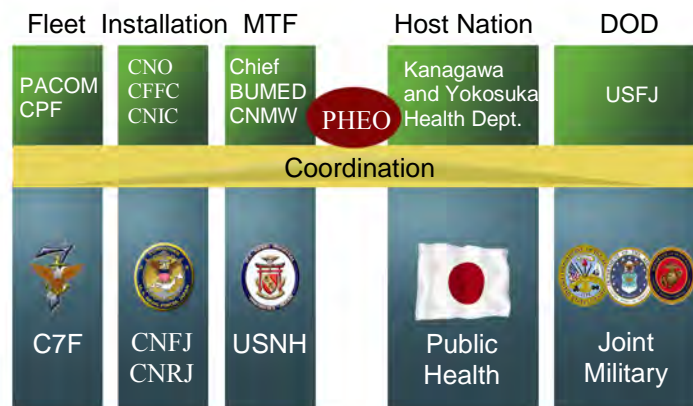
In spring of 2009, the H1N1 flu began to sweep the world. As it did, the public health emergency officers (PHEOs) at each of the WESTPAC Medical Alliance (WPMA) commands quickly came to play critical roles in the response to the new flu strain. From assessing the medical risk of this unknown flu to the military and working closely with the host nation to coordinate response to aggressively reaching out to the community to share important flu information and prevention tips, the WPMA PHEOs were essential to ensuring a comprehensive and clear response to H1N1 in the region.

"PHEOs provide commanders great support when we are faced with a public health threat," said Capt. Kevin Moore, the commanding officer for U.S. Naval Hospital (USNH) Yokosuka. "Particularly throughout the H1N1 outbreak, PHEOs dedicated themselves to maintaining awareness of this new flu and advising on best steps to protect the health of our people and, in turn, protecting our mission."

The PHEO, a position that was created by instruction in 2003, is usually a medical officer that has a background or experience in public health emergency management. The PHEO works closely with other health care workers, such as health care providers, pharmacists and even veterinarians, to monitor and report any circumstance suggesting a public health emergency. In the event of an actual public health emergency, the PHEO will investigate to determine what is causing the infection or condition and recommend steps to take to control its spread.

While the fundamental roles of most PHEOs are the same, there are some responsibilities that are unique to each location. For example, two of the three WPMA commands are located outside of the U.S. Because of their overseas locations, the PHEOs at USNH Okinawa and USNH Yokosuka also must keep up with their host nation counterparts.

"Coordination with the host nation is a must in a public health emergency," said Lt. Cmdr. Mike Termini, PHEO for USNH Yokosuka. "Because of our location, we have the responsibility to the host nation to ensure coordinated and effective surveillance, treatment and response."



A sample breakdown of the USNH Yokosuka PHEO duties. Graphic courtesy of USNH Yokosuka.

For the WPMA PHEOs, working with host nation counterparts and getting to the root of the cause of a public health emergency is a large part of their duties. At the same time, communicating with active duty members and their families is also critical during a public health emergency. Throughout H1N1, all three WPMA commands organized education and awareness campaigns that reached out to regional line commanders, all hands, Department of Defense schools and the general beneficiary population.

"Since the beginning of the H1N1 pandemic, the preventive medicine team at USNH Guam has been actively engaged in thwarting any potential threats the disease may pose to active duty forces, family members, Department of Defense employees and eligible beneficiaries on Guam," said Cmdr. Scott McKenzie, the director of public health at USNH Guam and PHEO for Joint Region Marianas. "We led an aggressive education and awareness campaign designed to provide information to Guam military families and beneficiaries to protect them against the H1N1 virus and limit the spread of the disease."

In the midst of pandemic flu or any public health threat, the military mission is to preserve readiness, save lives, reduce suffering and slow the spread of infection. Throughout the H1N1 outbreak, the leadership of the WPMA commanders and the work of the WPMA PHEOs to assess risk in a new and unknown situation, to integrate response with the host nation and to communicate with multiple groups served to fulfill that mission.



NICU Reaching Out to WESTPAC

By Brian Davis, U.S. Naval Hospital Okinawa

Although the Neonatal Intensive Care Unit (NICU) of the 18th Medical Operations Squadron based at U.S. Naval Hospital (USNH) Okinawa is the only U.S. military medical facility in WESTPAC that offers specialized care and transport for ill and premature newborns, the NICU staff has been quietly improving the level of care at installations throughout the theater.

In addition to its inpatient care and transport duties, the NICU conducts an "Outreach Mission" program where staff members travel to other military health care facilities in the Pacific to train health care providers and their support personnel to provide special care for neonatal patients.

"We go on temporary duty to the local military hospital or clinic and teach the medical personnel there how to stabilize and care for a critically ill baby until our transport team can get there," said Air Force Maj. Dawn Brooks, NICU Flight Commander.

The purpose of the program is to train local medical personnel on bases around the Pacific to provide critical medical support for babies that need to be moved to Okinawa or to the U.S. for specialized care. The Outreach Mission training also includes instruction for doctors, nurses and support personnel working with newborns to familiarize them with the highly specialized equipment used by 18th Medical Operations Squadron to transport the babies.



NICU personnel of the 18th Medical Operations Squadron based at USNH Okinawa prepare a baby for transport.

According to Brooks, the training can save lives and buy precious time for critically ill and premature infants by allowing local mother-baby providers to prepare the patients for a quicker, more efficient transition into the hands of the NICU transport staff. The NICU Outreach Mission team conducted training in Guam earlier in 2009 and traveled to Misawa Air Base, Japan in December.

The NICU is the referral center for neonatal care in the Western Pacific. Formerly located in the U. S. Air Force Hospital at Clark Air Base in the Republic of the Philippines, the unit was moved to U. S. Naval Hospital Okinawa in the early 1990s when Clark was closed following the eruption of Mt. Pinatubo.

WESTPAC Hospitals Look to Beneficiaries for Input on Enhancing Services

By Sarah Carey, U. S Naval Hospital Guam

In June, U. S. Naval Hospitals Guam, Okinawa and Yokosuka launched a two-phase project to collect qualitative feedback regarding the needs and wants of beneficiaries.

The first phase of the project included one-on-one patient interviews in various departments within the military treatment facilities (MTFs) of the WESTPAC Medical Alliance (WPMA). A total of 99 confidential patient interviews were conducted by department customer relations representatives. Interviewed patients reported the desire for timely service and professional staff members who administer personal attention. Patients also indicated they want friendly staff members who listen and communicate effectively and give thorough explanations about their diagnosis and treatment.

In February 2010, the WPMA will launch the second phase of the project by conducting focus groups at

each MTF. These focus groups will provide the WPMA with unfiltered, unbiased comments from segments of the beneficiary population. Based upon the data collected from both phases of the project, the WPMA will gain insight into how to better serve customers.



Ms. Bobbie Sablan (left), a department customer relations representative at USNH Guam, conducts a survey with an active duty beneficiary as part of the WPMA customer service survey. Photo by Information Systems Technician 1st Class Carlton Whittle, USNH Guam.



WESTPAC Medical Alliance 2009 Year in Review

U.S. Naval Hospital Guam

By Lt. j.g. Max Herrera, U.S. Naval Hospital Guam

Preparing for the Future

In order to fully support the current and future mission of USNH Guam, the commanding officer recently reorganized the hospital's structure by realigning the branch clinic directorate and reinstituting the public health directorate.

The realignment of the branch clinic directorate brings together the majority of the primary care functions under one directorate. The three family medicine clinics, the immunizations clinic, physical examinations, and deployment health, will now work together under the same leadership team. This change enables USNH Guam to increase efficiency and maximize staffing flexibility.

The new public health directorate will be able to better coordinate the command's mission of providing care to the fleet, the incoming Marine Corps forces and the expected increase in Army and Air Force assets in the region. The directorate will consist of preventive medicine, occupational medicine, radiation health, hearing conservation, wellness/health promotion and industrial hygiene and safety. Bringing these related services together creates a synergy that enables USNH Guam to better support its ever-changing customer base.

The future of the military build-up in Guam will continue to create new challenges and opportunities for success. This reorganization is an example of the dedication of USNH Guam to serving its customers by making appropriate changes to ensure the Navy Medicine team continues to provide world-class health services in support of the nation's military mission--anytime, anywhere.

Creating a Healing Environment

In support of providing unsurpassed quality care, USNH Guam recently made renovations to create an optimal healing environment. To start, the hospital looked to its patients and families for input. It then reviewed the feedback and developed a new design to promote a patient- and family-centered healing atmosphere.



USNH Guam's renovated intensive care unit waiting room offers beneficiaries a comfortable home-like environment. Photo by Information Systems Technician 1st Class Carlton Whittle, USNH Guam.

The inpatient waiting areas in the hospital including intensive care, multi-service and mother-baby units were renovated to include new couches, chairs, dining tables, local artwork, softer lighting and new window treatments. As a result, inpatient waiting areas now have the appearance of a comfortable home-like environment. This initiative was the start of a hospital-wide renovation campaign that has expanded to include ambulatory care and outpatient clinic areas.

Access to Care

USNH Guam takes pride in its ability to provide beneficiaries the care they want, when they want it. When access for acute and routine appointments in the family medicine clinics fell from 80 to 47 percent this past summer, Guam took action. The hospital undertook an initiative to re-evaluate clinic appointment types, clinic hours and providers' schedules. Several new policies were implemented including extending clinic hours and modifying and adding appointment types. These changes opened up approximately 20 to 30 appointments per day.

Additionally, USNH Guam implemented a set of business rules command-wide that standardized scheduling practices at the department and directorate level. The hard work of the staff along with the strict adherence to the new rules has led to Guam's current access success. In October 2009, its acute and routine appointments had surpassed TRICARE standards, not only in family medicine but also in many other clinical areas. This means it is now easier than ever for beneficiaries to get the care they need.



U.S. Naval Hospital Okinawa

By Brian Davis, U.S. Naval Hospital Okinawa

The New Facility

Perhaps the highlight of 2009 for U.S. Naval Hospital (USNH) Okinawa was that construction began, after a series of delays, on the new USNH facility at Camp Foster. Construction on the new 440,000-square-foot facility was stalled after artifacts were discovered at the construction site. Work was put on hold until the local government completed a cultural asset survey of the area. The Ginowan City government issued a Notice to Build in April 2009, allowing construction to proceed in areas where the cultural asset surveys are complete.



Okinawan workers excavate a section of the construction site looking for cultural artifacts. Due to the discovery of artifacts in sections of the construction site, archeological surveys must be completed before construction can proceed. Image provided courtesy of Navy Medicine West Detachment Okinawa.

The new facility will replace the current hospital function-for-function, but will have about 100,000 more square feet of space. The main hospital and critical supporting facilities, such as utility plants and public works structures, are currently planned to be complete in March 2011, with commissioning anticipated to take place in October 2011, according to a Navy Medicine West Detachment briefing paper. The remaining supporting facilities such as barracks, recreational facilities and blood bank are expected to be completed in 2012.

The new hospital compound is located on Camp Foster, in Ginowan City, just south of Camp Lester. The current hospital on Camp Lester (formerly Camp Kuwae) was originally commissioned in 1958 as U.S. Army Hospital Ryukyu Islands. It was turned over to the Navy and was commissioned as a Naval Regional Medical Center in 1977.



Artists renderings of the new U. S. Naval Hospital Okinawa on Camp Foster. Image provided courtesy of Navy Medicine West Detachment Okinawa.

Enhanced Access

In 2009, USNH Okinawa significantly improved access to care at its pediatric clinic and Lester family practice clinic by realigning clinic manning with the number of beneficiaries seeking care. By adding providers where they were most needed, the hospital was able to increase the number of daily appointments where they were needed and eliminate backlogs for appointments.

Care for Mothers-to-be

The Stork's Nest, which provides the mother-to-be close proximity to the hospital for the labor and delivery of her baby, added new couple and family suites. The new rooms, located on Camp Lester only three blocks from the hospital, are managed by Westpac Inn. These private suites can be booked through Westpac Inn and come complete with amenities and maid service, offering comfortable accommodations for patients and their families traveling to Okinawa for medical care.

U.S. Naval Hospital Yokosuka

By Jennifer Savage, U.S. Naval Hospital Yokosuka

USNH Yokosuka "Firsts"

On May 29, 2009, USNH Yokosuka became the first military treatment facility in Navy Medicine West to become tobacco free. This sent the right message to hospital beneficiaries and was well received by line commanders who offered accolades for this powerful message.



USNH Yokosuka's quarterdeck displays a banner announcing the hospital and its branch clinics are proud to be tobacco free. Photo by Richard McManus, USNH Yokosuka.

Another "first" was the Joint Commission International (JCI) accreditation given to Kameda Hospital in June. USNH Yokosuka worked closely with Kameda leaders in this effort, who acknowledged USNH in their ceremonial JCI accreditation acceptance. Kameda is the first hospital in Japan to obtain this important standard in health care.

Individual Medical Readiness

Individual medical readiness is critical to supporting the Navy's deployment efforts, and in 2009 USNH Yokosuka made a commitment to ensure that all active duty beneficiaries under its purview were medically ready to deploy at a moment's notice.

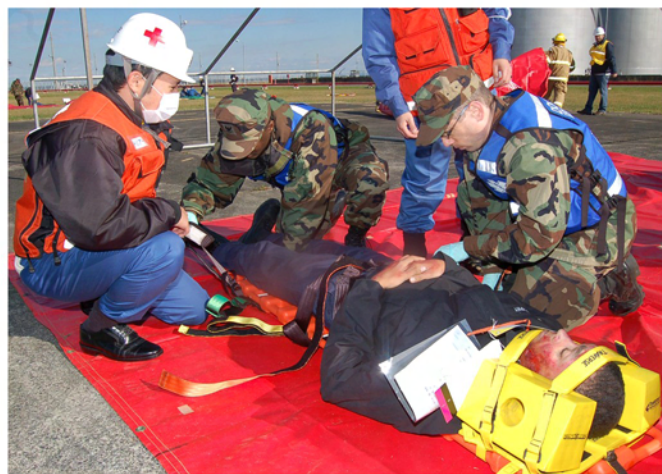
To do that, USNH Yokosuka took a three-pronged approach to increasing individual medical readiness. First, the hospital instituted a walk-in process for all military beneficiaries seeking their mandatory periodic health assessment. Second, it stepped up medical readiness reporting system (MRRS) training. Finally, it enhanced its patient tracking efforts. This three-tiered approach led the hospital to reach a fully medically ready rate of more than 85 percent in June, compared to the 70 percent that were medically ready six months earlier.

Disaster Preparedness

USNH Yokosuka has been one of only a few military treatment facilities to drill for disaster preparedness directly with its host nation. In 2009, the hospital participated in three drills with its Japanese Self-Defense Force (JSDF) counterparts: the Kanagawa Prefecture Government earthquake evacuation drill, the Tokyo Metropolitan Government disaster drill and the USNH Yokosuka, Commander Fleet Activities Yokosuka and JSDF mass casualty exercise.

While the drill scenarios were varied, the result was always the same – an excellent opportunity for first responders to hone their skills.

In each drill, the hospital's 30-member emergency response team (ERT) responded to simulated casualties, provided triage, resuscitation, stabilization and casualty evacuation assistance, all in concert with base and Kanagawa prefectural first responders.



USNH Yokosuka and host nation first responders attend to a simulated casualty during an annual bilateral disaster drill on Azuma Island. Photo by Richard McManus, USNH Yokosuka.

Way Ahead for 2010

In addition to reaching the accomplishments it set for itself in 2009, USNH Yokosuka also spent the year planning for what it will achieve in 2010. USNH Yokosuka has set three goals for the year that will ensure the delivery of health care services that are high quality, timely, relevant and responsive to the every changing need of its stakeholders. The first goal is ensuring access to care. This means providing health care access and availability to the right patient, by the right provider, at the right time and at the right place. Secondly, the hospital will continue in its unwavering patient safety efforts by ensuring that the services it provides are delivered within USNH Yokosuka's scope of care and that the beneficiaries who require services have access to a medical management program that allows for continuity of care, no matter the type of care needed or where it is received. The hospital's third goal for 2010 addresses those who are at the heart of health care – people. USNH Yokosuka is committed to improving the efficiency and effectiveness of its staff and will spend 2010 making sure its staff have the right skills and tools to deliver treatment and services to those entrusted to its care.

4th Quarter, 2009



Newsletter

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WESTPAC Medical Alliance (WPMA) Overseas Screening:

<http://www.med.navy.mil/sites/nhoki/Patients/OSS/Pages/default.aspx>

Please visit this centralized Web site to review overseas screening (OSS) requirements for those being screened for suitability for assignment in the Western Pacific Rim. This site contains Navy/Department of Defense instructions; Exceptional Family Member & OSS forms for all military services; and each WPMA hospital's contact information, OSS Web page, list of available clinical services and a list of medical conditions that will result in automatic denial or will require more information before receiving overseas screening approval to the Western Pacific.

Feedback and Comments

We'd love to hear from you!

Did you find any portions of this newsletter particularly useful?

Are there items would you like to see included in future issues of this newsletter?

Please e-mail nhyokosuka-pao@med.navy.mil with your feedback.



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